Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unit PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
	CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER TH	
	FOR	NUM	NUMBER FILED		NUMBER EXTRA			FEE]	RATE	T
	SIC FEE CFR 1.16(a))						_	s	1	MAIE	- FI
TO	TAL CLAIMS CFR 1.16(c))		minus 2	20 - 1.	·	<u> </u>	_	<u></u>	OR		\ <u> </u>
INDEPENDENT CLAIN		IMS				× \$	=		OR	× \$=	 -
(37	CFR 1.16(b))	S. 100			Ξ ,		=		OR	X \$=	ļ
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter *0" in				enter "0" in column	2.	TOTAL			OR	TOTAL	
	, , , ,	LAIMS AS AM	IENDEL) _ PART II					-		<u> </u>
	O	LAIMO AO AN	ILINDEL) - (ANTII						OTHE	D THAN
		(Column 1)	٠.,				SMALL ENTITY		OR	OR OTHER THA	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	AD TIOI FE
	Total (37 CFR 1.16(c))	•	Minus	••	=	× s	_		OR	× \$ =	
	Independent (37 CFR 1.16(b))	·	Minus	•••	=		=]		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+		OR	=	
		TATION OF MOETIFE	·	ENT COMM (37 C)	1,10(0))	TOTAL			OR	+ \$ = TOTAL	ļ
		,				ADD'L FE	Ŀ		OR	ADD'L FEE	
		(Column 1)	, 	(Column 2)	(Column 3)	<u> </u>				<u></u>	
AMENDMENT B	2.16.05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	. PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE .	ADI TION FE
	Total (37 CFR 1.16(c))	. 17	Minus	20	=	X \$	=		OR	X § =	
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))										
				1000000	(1.10/0//	TOTAL	+-		OR	+ \$ = TOTAL	
				: *		ADD'L FEE	L		OR	ADD'L FEE	<u></u>
· · ·		(Column 1)		(Column 2)	(Column 3)						
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADI TION FE
ᅙᅡ	Total (37 CFR 1,16(c))	•	Minus	••	=	x \$ =			OR	x \$ =	
	Independent (37 CFR 1,16(b))		Minus	•••	=	x \$ =					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+		OR		
	I MOI FRESENTA	THOR OF MULTIPLE	VERENUE	THE CLAIM (37 CF)	1.10(0))	+ \$=	-		OR	+ <u>\$</u> =	
	•		•		•	ADD'L FEE			OR	ADD'L FEE	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.